

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	hrg		8-20-00
O.I.P.E. CLASSIFIER			5-200
FORMALITY REVIEW	PAUB	100976	6-20-00
RESPONSE FORMALITY REVIEW	PAUB	100976	8-30-00

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	7/27/00
Original	7/27/00
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Claim	Date
Final	8/17/00
Original	8/17/00
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Claim	Date
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REST AVAILABLE COPY

If more than 150 claims or 10 actions  
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